

**COMMONWEALTH OF VIRGINIA
DEPARTMENT OF MINES, MINERALS AND ENERGY
DIVISION OF MINED LAND RECLAMATION
P. O. DRAWER 900; BIG STONE GAP, VIRGINIA 24219
Telephone: (276) 523-8100**

APPLICATION GUIDE

**Coal Surface Mining and Reclamation Operations
Permittee Information**

General Instructions:

This guide is designed to present the permittee information in a standardized and structured format. Copies of the various forms which need to be completed are included at the end of the application package for your use. If you need to include any attachments or forms, please clearly reference or cross-reference to the appropriate item number.

All attachments, shall include attachment numbers and be placed within the body of the application. **For persons wishing to submit the application package electronically, please be advised the original application must be submitted on paper with original signatures and certifications.**

The disclosure of Social Security Numbers is optional.

PERMITTEE INFORMATION

- 1.1 **Application Number** – The Applicant or Consultant will either contact the DMLR Permit Mailbox via e-mail (DmlrPermitting@mme.state.va.us) or may call the Customer Assistance Center (276-523-8235 or 276-523-8233) to obtain an application number and a download of current permit data. Additional information may also be provided if specifically requested (mapping, etc.).

1.2 **Type of Application** - Use the applicable code(s) to identify type of application:

Code	Application Type	Code	Application Type
N	Add new permittee	M	Modify existing permittee
VP	Updating Permit History/Violation Information	UA	Update address information

1.3 **Permittee/Company Information** - Include the name, mailing address, phone number, employer identification number, social security number (optional), DMLR code, AVS Entity number, fax number, email address and the preferred order of contact.

If removing an official, principal shareholder, or the company itself as the operator, provide the effective date of such action and copy the supporting documentation (i.e., board resolution, resignation letter, etc.).

1.4 **Resident Agent Information** – List the name, mailing address, phone number, Resident Agent employer identification number, social security number (optional), DMLR code, AVS Entity number, fax number, email address, and the preferred order of contact. (The permittee assumes responsibility for mail delivered to the business street address and will notify DMLR of changes in this address through the time of final bond release.)

1.5 **Legal Structure of Permittee** – Indicate and include documents which establish the legal structure of the permittee.

- ? Single Proprietorship
- ? Partnership
- ? Corporation
- ? Association
- ? LLC (Limited Liability Corporation/Company)
- ? Other

1.6 **Ownership / Control Information** - Include the name, mailing address (if P.O. Box, indicate street address), phone number, employer identification number, social security number, ownership and control relationship to applicant, location in organizational structure, percent of ownership, official title, and beginning date of ownership or affiliation. **(Note: For all officers, directors, stockholders, etc., attachment 1.6 must be utilized for each. Include as many attachments as necessary to complete the ownership chain).**

1.7 **Previously Issued Permits** – List all permits issued with the five (5) years preceding the date of this application for surface coal mining operations.

1.8 **Violation Information** – Indicate if the permittee or other person(s) listed in Item 1.6 -

? Had a federal or state coal mining permit suspended or revoked in the five (5) years preceding the date of this application. If yes, provide the name, permittee, permit number, date of issuance, regulatory authority suspending or revoking the permit, stated reason for action, and current status of the proceedings.

? Forfeited a reclamation performance bond or a security deposited in lieu of a bond. If yes, provide the name, permittee, permit number, date of issuance, regulatory authority forfeiting the bond or security, stated reason for action, and current status of the proceedings.

? Has been issued a notice of violation in connection with any surface coal mining and reclamation operation within the three (3) years preceding the date of this application. If yes, provide the name to whom the violation was issued, permit number, MSHA number, violation identification number, issuing regulatory authority, date violation issued, description of alleged violation, abatement actions, and current status of the proceedings.

? Has unabated cessation orders received prior to the date of this application. If yes, provide the name to whom the cessation order was issued, permit number, MSHA number, violation identification number, issuing regulatory authority, date violation issued, description of alleged violation, abatement actions, and current status of the proceedings.

1.9 Attach Appropriate Authorization(s)/Verification(s) and Certification(s). -
Attach a duly signed and notarized DMLR-PT-034D.



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TELEPHONE: (276) 523-8202

**CERTIFICATION - APPLICATION FOR PERMIT
COAL SURFACE MINING AND RECLAMATION OPERATIONS**

NAME OF APPLICANT		APPLICATION NUMBER	
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CERTIFICATION:

I hereby certify that I am the authorized representative of the Applicant and affirm that the information provided on this form and all attachments submitted herewith are true and accurate to the best of my knowledge. I further affirm that the surface coal mining and reclamation operations proposed under this Application will be conducted pursuant to the terms and conditions of this Application, or such conditions as may be set by the Division pursuant to the requirements of the **Virginia Coal Surface Mining Control and Reclamation Act of 1979** (Chapter 19, Title 45.1, **Code of Virginia** (1950), as amended), and the regulations promulgated thereunder.

Signature			
Title/Position		Date	

NOTE: If the person signing this certification is not listed under Item 1.6 of the "Application for Coal Surface Mining and Reclamation Operations – Permittee Information" (DMLR-PT-034p), attach a copy of the Power of Attorney, or Resolution of Board of Directors which allows the person to act on behalf of the Permit Applicant.

Notarization:

Subscribed and sworn/affirmed to before me by _____ this
day of _____, 20 _____, in the City/County of _____.

Notary Public Signature		My Commission Expires (attach SEAL)	
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